FEC FORM 1

STATEMENT OF ORGANIZATION

| FORM 1 | | RGANIZA | | N | | |
|-----------------------------------------------|--------------------------|----------------------------|--------------|---------------------------------------------------------------------------------------------------------|-------------|------------------------------------------|
| 1 01111111 | | (See instructions | s) | | | Office use only |
| NAME OF COMMITTEE (iii | n full) | (Check if name is changed) | Exar over | nple: If typying, type the lines | 12FE4M5 | |
| NATIONAL A | SPHALT PAVEME | NT ASSOCIATIO | N POLI | TICAL ACTION COM | IMITTEE (NA | \ PA - |
| | | | | | | |
| ADDRESS (number an | d street) | CONSTITUTION A | VENU | E NW | | |
| (Check if addre | sulT | E 600 WEST | | <u> </u> | 1111 | |
| is changed) | | HINGTON | | | DC | 20001 - |
| | | 1 | CITY | | STATE | ZIP CODE ▲ |
| COMMITTEE'S E-M. | AIL ADDRESS (Please | e provide only one e-m | ail addre | ess) | | |
| (Check if addre | ss dmc | cann@vsadc.con | n | | | |
| | | | | | | |
| COMMITTEE'S WE | B PAGE ADDRESS (U | RL) | | | | |
| (Check if addre | ss | | | | | |
| | ـــــا | | | | | |
| 2. DATE 0 | M / D D / Y | 2009° | | | | |
| 3. FEC IDENTIFICATION NUMBER C C00444539 | | | | | | |
| 4. IS THIS STATEMENT NEW (N) OR X AMENDED (A) | | | | | | |
| I certify that I have exar | nined this Statement and | I to the best of my know | rledge an | d belief it is true, correct and | d complete | |
| | | Steven O. Palmer | | | | |
| Type or Print Name of | f Treasurer | oteven O. Panner | | | | |
| Signature of Treasure | er Electronically File | d by Steven O. I | Palmer | | Date 0,7 | 17 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| NOTE: Submission of | | | | ne person signing this State | | |
| Office Use Only | | | | For further information of Federal Election Commissi Toll Free 800-424-9530 Local 202-694-1100 | | FEC FORM 1 (Revised 02/2009) |